

BUDAPEST TREATY ON THE INTERNATIONAL  
RECOGNITION OF THE DEPOSIT OF MICROORGANISMS  
FOR THE PURPOSES OF PATENT PROCEDURE

**DSMZ**

Deutsche Sammlung von  
Mikroorganismen und  
Zellkulturen GmbH


INTERNATIONAL FORM

BASF AG

Carl-Bosch-Str. 38

67056 Ludwigshafen

RECEIPT IN THE CASE OF AN ORIGINAL DEPOSIT  
issued pursuant to Rule 7.1 by the  
INTERNATIONAL DEPOSITARY AUTHORITY  
identified at the bottom of this page

<b>I. IDENTIFICATION OF THE MICROORGANISM</b>	
Identification reference given by the DEPOSITOR: DSM No. 2649	Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY:  DSM 15751
<b>II. SCIENTIFIC DESCRIPTION AND/OR PROPOSED TAXONOMIC DESIGNATION</b>	
The microorganism identified under I. above was accompanied by:  ( ) a scientific description (x) a proposed taxonomic designation (Mark with a cross where applicable).	
<b>III. RECEIPT AND ACCEPTANCE</b>	
This International Depositary Authority accepts the microorganism identified under I. above, which was received by it on 2003-07-11 (Date of the original deposit) <sup>1</sup> .	
<b>IV. RECEIPT OF REQUEST FOR CONVERSION</b>	
The microorganism identified under I above was received by this International Depositary Authority on (date of original deposit) and a request to convert the original deposit to a deposit under the Budapest Treaty was received by it on (date of receipt of request for conversion).	
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>	
Name: DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH  Address: Mascheroder Weg 1b D-38124 Braunschweig	Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):    Date: 2003-07-16

<sup>1</sup> Where Rule 6.4 (d) applies, such date is the date on which the status of international depositary authority was acquired.

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BASF AG  
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67056 Ludwigshafen

VIABILITY STATEMENT  
issued pursuant to Rule 10.2 by the  
INTERNATIONAL DEPOSITARY AUTHORITY  
identified at the bottom of this page

<b>I. DEPOSITOR</b>		<b>II. IDENTIFICATION OF THE MICROORGANISM</b>	
Name: BASF AG Carl-Bosch-Str. 38 Address: 67056 Ludwigshafen		Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY:  DSM 15751  Date of the deposit or the transfer <sup>1</sup> :  2003-07-11	
<b>III. VIABILITY STATEMENT</b>			
The viability of the microorganism identified under II above was tested on 2003-07-14 <sup>2</sup> . On that date, the said microorganism was  (X) <sup>3</sup> viable ( ) <sup>3</sup> no longer viable			
<b>IV. CONDITIONS UNDER WHICH THE VIABILITY TEST HAS BEEN PERFORMED<sup>4</sup></b>			
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>			
Name: DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH Address: Mascheroder Weg 1b D-38124 Braunschweig		Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):  <i>U. Weis</i>  Date: 2003-07-16	

- <sup>1</sup> Indicate the date of original deposit or, where a new deposit or a transfer has been made, the most recent relevant date (date of the new deposit or date of the transfer).  
<sup>2</sup> In the cases referred to in Rule 10.2(a) (ii) and (iii), refer to the most recent viability test.  
<sup>3</sup> Mark with a cross the applicable box.  
<sup>4</sup> Fill in if the information has been requested and if the results of the test were negative.

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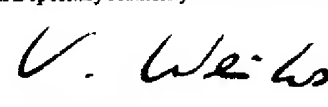
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<b>I. DEPOSITOR</b>	<b>II. IDENTIFICATION OF THE MICROORGANISM</b>
<b>Name:</b> BASF AG <b>Address:</b> Carl-Bosch-Str. 38 67056 Ludwigshafen	<b>Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY:</b>  DSM 15752  <b>Date of the deposit or the transfer<sup>1</sup>:</b>  2003-07-11
<b>III. VIABILITY STATEMENT</b>	
The viability of the microorganism identified under II above was tested on 2003-07-14 <sup>1</sup> . On that date, the said microorganism was  <input checked="" type="checkbox"/> viable <input type="checkbox"/> no longer viable	
<b>IV. CONDITIONS UNDER WHICH THE VIABILITY TEST HAS BEEN PERFORMED<sup>4</sup></b>	
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>	
<b>Name:</b> DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH  <b>Address:</b> Mascheroder Weg 1b D-38124 Braunschweig	<b>Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):</b>    <b>Date:</b> 2003-07-16

- <sup>1</sup> Indicate the date of original deposit or, where a new deposit or a transfer has been made, the most recent relevant date (date of the new deposit or date of the transfer).  
<sup>2</sup> In the cases referred to in Rule 10.2(a) (ii) and (iii), refer to the most recent viability test.  
<sup>3</sup> Mark with a cross the applicable box.  
<sup>4</sup> Fill in if the information has been requested and if the results of the test were negative.

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<b>I. IDENTIFICATION OF THE MICROORGANISM</b>	
Identification reference given by the DEPOSITOR: <b>DSM No 4864</b>	Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY: <b>DSM 15752</b>
<b>II. SCIENTIFIC DESCRIPTION AND/OR PROPOSED TAXONOMIC DESIGNATION</b>	
The microorganism identified under I. above was accompanied by:  <input type="checkbox"/> a scientific description <input checked="" type="checkbox"/> a proposed taxonomic designation (Mark with a cross where applicable).	
<b>III. RECEIPT AND ACCEPTANCE</b>	
This International Depositary Authority accepts the microorganism identified under I. above, which was received by it on <b>2003-07-11</b> (Date of the original deposit) <sup>1</sup> .	
<b>IV. RECEIPT OF REQUEST FOR CONVERSION</b>	
The microorganism identified under I above was received by this International Depositary Authority on _____ (date of original deposit) and a request to convert the original deposit to a deposit under the Budapest Treaty was received by it on _____ (date of receipt of request for conversion).	
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>	
Name: <b>DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH</b>  Address: <b>Mascheroder Weg 1b D-38124 Braunschweig</b>	Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):    Date: <b>2003-07-16</b>

<sup>1</sup> Where Rule 6.4 (d) applies, such date is the date on which the status of international depositary authority was acquired.

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<b>I. IDENTIFICATION OF THE MICROORGANISM</b>	
Identification reference given by the DEPOSITOR: <p align="center"><b>DSM No. 20017</b></p>	Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY:  <p align="center"><b>DSM 15753</b></p>
<b>II. SCIENTIFIC DESCRIPTION AND/OR PROPOSED TAXONOMIC DESIGNATION</b>	
The microorganism identified under I. above was accompanied by:  <div style="display: flex; justify-content: center; gap: 20px;"> <span>(   ) a scientific description</span> <span>( <input checked="" type="checkbox"/> ) a proposed taxonomic designation</span> </div> (Mark with a cross where applicable).	
<b>III. RECEIPT AND ACCEPTANCE</b>	
This International Depositary Authority accepts the microorganism identified under I. above, which was received by it on <b>2003-07-11</b> (Date of the original deposit) <sup>1</sup> .	
<b>IV. RECEIPT OF REQUEST FOR CONVERSION</b>	
The microorganism identified under I above was received by this International Depositary Authority on _____ (date of original deposit) and a request to convert the original deposit to a deposit under the Budapest Treaty was received by it on _____ (date of receipt of request for conversion).	
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>	
Name: <b>DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH</b>  Address: <b>Mascheroder Weg 1b D-38124 Braunschweig</b>	Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):  <p align="center"><i>V. Weiss</i></p> <p align="center">Date: <b>2003-07-16</b></p>

<sup>1</sup> Where Rule 6.4 (d) applies, such date is the date on which the status of international depositary authority was acquired.

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<b>I. DEPOSITOR</b>		<b>II. IDENTIFICATION OF THE MICROORGANISM</b>	
Name: BASF AG Carl-Bosch-Str. 38 Address: 67056 Ludwigshafen		Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY:  DSM 15753  Date of the deposit or the transfer <sup>1</sup> :  2003-07-11	
<b>III. VIABILITY STATEMENT</b>			
The viability of the microorganism identified under II above was tested on 2003-07-14 <sup>2</sup> . On that date, the said microorganism was  (X) <sup>3</sup> viable ( ) <sup>3</sup> no longer viable			
<b>IV. CONDITIONS UNDER WHICH THE VIABILITY TEST HAS BEEN PERFORMED<sup>4</sup></b>			
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>			
Name: DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH Address: Mascheroder Weg 1b D-38124 Braunschweig		Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):    Date: 2003-07-16	

<sup>1</sup> Indicate the date of original deposit or, where a new deposit or a transfer has been made, the most recent relevant date (date of the new deposit or date of the transfer).

<sup>2</sup> In the cases referred to in Rule 10.2(a) (ii) and (iii), refer to the most recent viability test.

<sup>3</sup> Mark with a cross the applicable box.

<sup>4</sup> Fill in if the information has been requested and if the results of the test were negative.

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<b>I. IDENTIFICATION OF THE MICROORGANISM</b>	
Identification reference given by the DEPOSITOR: DSM No. 20074	Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY:  DSM 15754
<b>II. SCIENTIFIC DESCRIPTION AND/OR PROPOSED TAXONOMIC DESIGNATION</b>	
The microorganism identified under I. above was accompanied by:  ( ) a scientific description ( X ) a proposed taxonomic designation (Mark with a cross where applicable).	
<b>III. RECEIPT AND ACCEPTANCE</b>	
This International Depositary Authority accepts the microorganism identified under I. above, which was received by it on 2003-07-11 (Date of the original deposit) <sup>1</sup> .	
<b>IV. RECEIPT OF REQUEST FOR CONVERSION</b>	
The microorganism identified under I above was received by this International Depositary Authority on _____ (date of original deposit) and a request to convert the original deposit to a deposit under the Budapest Treaty was received by it on _____ (date of receipt of request for conversion).	
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>	
Name: DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH  Address: Mascheroder Weg 1b D-38124 Braunschweig	Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):    Date: 2003-07-16

<sup>1</sup> Where Rule 6.4 (d) applies, such date is the date on which the status of international depositary authority was acquired.

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<b>I. DEPOSITOR</b>	<b>II. IDENTIFICATION OF THE MICROORGANISM</b>
Name: BASF AG Carl-Bosch-Str. 38 Address: 67056 Ludwigshafen	Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY:  DSM 15754  Date of the deposit or the transfer <sup>1</sup> :  2003-07-11
<b>III. VIABILITY STATEMENT</b>	
The viability of the microorganism identified under II above was tested on 2003-07-14 <sup>2</sup> . On that date, the said microorganism was  <input checked="" type="checkbox"/> <sup>3</sup> viable <input type="checkbox"/> <sup>3</sup> no longer viable	
<b>IV. CONDITIONS UNDER WHICH THE VIABILITY TEST HAS BEEN PERFORMED<sup>4</sup></b>	
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>	
Name: DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH  Address: Mascheroder Weg 1b D-38124 Braunschweig	Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):    Date: 2003-07-16

- <sup>1</sup> Indicate the date of original deposit or, where a new deposit or a transfer has been made, the most recent relevant date (date of the new deposit or date of the transfer).  
<sup>2</sup> In the cases referred to in Rule 10.2(a) (ii) and (iii), refer to the most recent viability test.  
<sup>3</sup> Mark with a cross the applicable box.  
<sup>4</sup> Fill in if the information has been requested and if the results of the test were negative.



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<b>I. IDENTIFICATION OF THE MICROORGANISM</b>	
Identification reference given by the DEPOSITOR: <b>DSM No. 20207</b>	Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY: <b>DSM 15755</b>
<b>II. SCIENTIFIC DESCRIPTION AND/OR PROPOSED TAXONOMIC DESIGNATION</b>	
The microorganism identified under I. above was accompanied by:  <input type="checkbox"/> a scientific description <input checked="" type="checkbox"/> a proposed taxonomic designation (Mark with a cross where applicable).	
<b>III. RECEIPT AND ACCEPTANCE</b>	
This International Depositary Authority accepts the microorganism identified under I. above, which was received by it on <b>2003-07-11</b> (Date of the original deposit) <sup>1</sup> .	
<b>IV. RECEIPT OF REQUEST FOR CONVERSION</b>	
The microorganism identified under I above was received by this International Depositary Authority on _____ (date of original deposit) and a request to convert the original deposit to a deposit under the Budapest Treaty was received by it on _____ (date of receipt of request for conversion).	
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>	
Name: <b>DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH</b>  Address: <b>Mascheroder Weg 1b D-38124 Braunschweig</b>	Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):    Date: <b>2003-07-16</b>

<sup>1</sup> Where Rule 6.4 (d) applies, such date is the date on which the status of international depositary authority was acquired.

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<b>I. DEPOSITOR</b>	<b>II. IDENTIFICATION OF THE MICROORGANISM</b>
<b>Name:</b> BASF AG <b>Address:</b> Carl-Bosch-Str. 38 67056 Ludwigshafen	<b>Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY:</b>  DSM 15755  <b>Date of the deposit or the transfer<sup>1</sup>:</b>  2003-07-11
<b>III. VIABILITY STATEMENT</b>	
The viability of the microorganism identified under II above was tested on 2003-07-14 <sup>2</sup> . On that date, the said microorganism was  <input checked="" type="checkbox"/> <sup>3</sup> viable <input type="checkbox"/> <sup>3</sup> no longer viable	
<b>IV. CONDITIONS UNDER WHICH THE VIABILITY TEST HAS BEEN PERFORMED<sup>4</sup></b>	
<b>V. INTERNATIONAL DEPOSITARY AUTHORITY</b>	
<b>Name:</b> DSMZ-DEUTSCHE SAMMLUNG VON MIKROORGANISMEN UND ZELLKULTUREN GmbH  <b>Address:</b> Mascheroder Weg 1b D-38124 Braunschweig	<b>Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):</b>    <b>Date:</b> 2003-07-16

- <sup>1</sup> Indicate the date of original deposit or, where a new deposit or a transfer has been made, the most recent relevant date (date of the new deposit or date of the transfer).  
<sup>2</sup> In the cases referred to in Rule 10.2(a) (ii) and (iii), refer to the most recent viability test.  
<sup>3</sup> Mark with a cross the applicable box.  
<sup>4</sup> Fill in if the information has been requested and if the results of the test were negative.